

Minutes of the meeting of the Board of Directors of the Cook County Health and Hospitals System held Wednesday, October 7, 2009 at the hour of 7:30 A.M. at 1900 W. Polk Street, in the second floor student lounge, Chicago, Illinois.

I. Attendance/Call to Order

Chairman Batts called the meeting to order at approximately 7:37 A.M.

Present: Chairman Warren L. Batts, Vice Chairman Ramirez and Directors David A. Ansell, MD, MPH; David Carvalho; Quin R. Golden; Benn Greenspan, PhD, MPH, FACHE; Sister Sheila Lyne, RSM; Luis Muñoz, MD, MPH; Heather E. O'Donnell, JD, LLM; and Andrea Zopp (10)

Absent: Director Hon. Jerry Butler (1)

Additional attendees and/or presenters were:

Michael Ayres	Sara Hynes	Deborah Santana
Johnny Brown	Stephen Martin, PhD, MPH	Deborah Tate
Patrick T. Driscoll, Jr.	Terry Mason, MD	Anthony J. Tedeschi, MD, MPH,
Leslie Duffy	John Morales	MBA
William T. Foley	Elizabeth Reidy	

II. Public Speakers

Chairman Batts asked the Secretary to call upon the registered speakers.

The Secretary called upon the following registered public speaker:

1. George Blakemore Concerned Citizen

III. Report from Chairman of the Board

Chairman Batts stated that he had nothing to report at this time.

IV. Report from Chief Executive Officer

William T. Foley, Chief Executive Officer, reported on the following subjects:

- *Update on Performance Improvement Plan*

Mr. Foley provided an update on the performance improvement plan. He stated that the assessment phase is essentially completed; an assessment of Cermak Health Services was recently added to the tasks as an addendum, and should be completed within a couple of weeks. Approximately \$60-70 million of opportunities have been identified throughout the System.

The next phase is to implement the plan. Normally, a consulting firm would be engaged to do a full-blown implementation of the plan; this will not be necessary, as some of the pieces are already being implemented, such as those relating to labor, productivity and workforce rebalancing. However, there is a need for the engagement of a consulting firm to implement other opportunities and pieces of the plan, such as those relating to supply chain and other areas. Work addressing this is currently underway; the recommendation will come back through the Finance Committee and will be part of the whole implementation plan.

IV. Report from Chief Executive Officer (continued)

- *New System Chief Medical Officer*

Mr. Foley introduced the System's new System Chief Medical Officer, Dr. Terry Mason. Dr. Mason, currently the City of Chicago's Health Commissioner, will be assuming the position on December 7, 2009. Mr. Foley noted that he introduced Dr. Mason to the Cook County Board at their meeting of October 6, 2009.

V. Board and Committee Reports

A. Minutes of the Board of Directors Meeting, September 18, 2009

Director Greenspan, seconded by Director Lyne, moved the approval of the minutes of the Board of Directors Meeting of September 18, 2009. THE MOTION CARRIED UNANIMOUSLY.

B. Minutes of the Board of Directors Special Meeting, September 18, 2009

Director Lyne, seconded by Director O'Donnell, moved the approval of the minutes of the Board of Directors Special Meeting of September 18, 2009. THE MOTION CARRIED UNANIMOUSLY.

C. *Minutes of the Quality and Patient Safety Committee Meeting, September 22, 2009

During the presentation and discussion of the minutes of this meeting, an extensive discussion took place on an item relating to a recommendation from leadership for influenza vaccination requirements for employees. At the Quality and Patient Safety Committee Meeting of September 22, 2009, a motion to approve proposed amendments to the employee health policies, as summarized by Dr. Stephen Martin and attached to the minutes of that meeting, passed unanimously.

Subsequently, a revised recommendation was prepared and distributed to the Board prior to the meeting of the Board of Directors of October 7, 2009. Director Carvalho questioned the process used to communicate the proposed revisions to the Directors, and objected that the proposed revisions were not minor in nature, compared to the recommendations contained in the document approved by the Quality and Patient Safety Committee.

Dr. Martin provided information on the proposed revisions. He stated that there were some clean-up language revisions, revisions which provide more flexibility, and revisions with regard to exemptions that would make the System's policy more consistent with other organizations.

Director Ansell requested that Dr. Martin state the specific changes between the two documents. Dr. Martin stated that the document reviewed and approved by the Quality and Patient Safety Committee contained a requirement of mandatory influenza vaccinations for System employees. After the approval of the recommendation from the Committee, his staff continued to review the document, and received feedback from Infectious Diseases, Employee Health, Human Resources and Administration staff. This (revised document) provides an opportunity to clean-up issues that would have been a problem on day one, such as those relating to compliance and understanding by the System employees.

V. Board and Committee Reports

**C. Minutes of the Quality and Patient Safety Committee Meeting,
September 22, 2009 (continued)**

Director Carvalho disagreed, stating that the revised document contained fundamental changes. He stated that the recommendation approved by the Committee would be considered a “Loyola model,” or a mandatory vaccination requirement for employees, with the only exception being medical contraindications. The proposed revised recommendation, however, contains language that allows for other exceptions. Director Ansell agreed, noting that the Committee made their decision based upon “best practices”; the proposed revisions could create a gap or loophole, which defeats the purpose of a mandatory vaccine policy.

The Board discussed the issue further, and information was provided on employee vaccination policies for other similar institutions. Additionally, the Board discussed the issue of implementation of a mandatory vaccine policy.

It was determined that the item would be remanded back to the Quality and Patient Safety Committee for further review and consideration. Director Greenspan requested that the Committee be asked to make the decision, and be given the authority by the Board to move ahead with the decision. Due to the time-sensitive nature of the item, Mr. Foley suggested that a special Committee meeting be scheduled in the next week for consideration of this matter.

Director Zopp, seconded by Director Lyne, made the following motion:

- To approve the minutes of the Quality and Patient Safety Committee Meeting of September 22, 2009, with the exception of the recommendation relating to influenza vaccination requirements for employees, which will be remanded back to the Quality and Patient Safety Committee for further review and consideration;
- To authorize the Quality and Patient Safety Committee to work with management to develop a final policy relating to influenza vaccination requirements for employees for approval; and
- To authorize the Quality and Patient Safety Committee to approve and effectuate this final policy.

On the motion, a voice vote was taken and THE MOTION CARRIED UNANIMOUSLY.

D. *Minutes of the Human Resources Committee Meeting, September 29, 2009

Director Zopp, seconded by Vice Chairman Ramirez, moved the approval of the minutes of the Human Resources Committee Meeting of September 29, 2009. THE MOTION CARRIED UNANIMOUSLY.

E. Minutes of the Finance Committee Meeting, September 29, 2009

Director Golden, seconded by Vice Chairman Ramirez, moved the approval of the minutes of the Finance Committee Meeting of September 29, 2009. THE MOTION CARRIED.

Director Carvalho voted PRESENT on request numbers 1, 2, 3, 4 and 5, under the Contracts and Procurement Items contained in the minutes of the Finance Committee Meeting of September 29, 2009.

VI. Recommendations, Discussion/Information Items

A. Update from Ad Hoc Working Group on Medical School Relationships

Director Lyne described an issue with regard to Committee and Board approval of medical school relationships. She stated that at the last Board meeting, the Board approved an OB/Gyne relationship with Northwestern; the relationship is reasonable, as Northwestern has a larger volume of births, while John H. Stroger, Jr. Hospital of Cook County has a larger volume of patients receiving gynecological services. This item came to the Board through the Finance Committee, however, some of these affiliation agreements go through the Quality and Patient Safety Committee. There doesn't appear to be a clear pattern or process with regard to the presentation for approval of these relationships.

Chairman Batts recommended that before any contracts for medical school relationships go to the Finance or Quality and Patient Safety Committees, or to the Board, that these be reviewed by Director Lyne's working group. Additionally, Director Ansell requested that the process of approval from Director Lyne's working group through the final Board approval be reviewed and refined.

B. Miscellaneous

Chairman Batts, seconded by Director Lyne, moved to enter the following congratulatory communication into the record: "On behalf of the Cook County Health and Hospitals System, we hereby congratulate Rush University Medical Center for being chosen by University HealthSystem Consortium as one of the top five hospitals for patient outcomes." THE MOTION CARRIED UNANIMOUSLY.

VII. Action Items

A. Contracts and Procurement Items (Attachment #1)

Director Greenspan requested additional information on the increase and extension of the contract for the provision of PET scanning, specifically on the subject of clinical needs. Leslie Duffy responded that only twenty PET scans are being done per month, and provided information relating to the request presented. Director Ansell requested that an analysis be presented on the subject at the next Quality and Patient Safety Committee meeting. Johnny Brown, Chief Operating Officer of John H. Stroger, Jr. Hospital of Cook County, stated that an analysis of these services can be provided. He echoed Ms. Duffy's comments, stating that the usage is very limited now and is done on an outpatient basis.

Director Carvalho clarified that the request to increase and extend was for a future period; this request does not involve payment for prior services rendered. Ms. Duffy responded affirmatively.

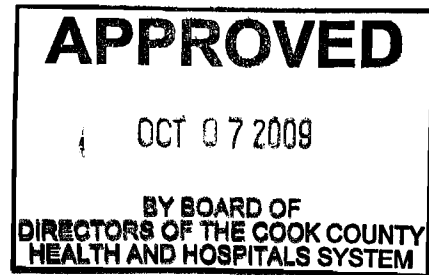
Additionally, Director Carvalho inquired as to the reason for the contract increase and extension, as it was stated in the request that the reason was due to technical issues with the System's website, which impacted Purchasing's ability to schedule bid openings. Ms. Duffy responded that there have been complications with the new website, so they have been unable to post Request for Bids and Request for Proposals; they will be able to post manually this week.

Director Carvalho, seconded by Director Golden, moved the approval of the Contracts and Procurement Items. THE MOTION CARRIED UNANIMOUSLY.

Cook County Health and Hospitals System
Minutes of the Board of Directors Meeting
October 7, 2009

ATTACHMENT #1

COOK COUNTY HEALTH AND HOSPITALS SYSTEM
Request to Extend & Increase Dollar Amount of Existing Contract



Date: September 22, 2009

Sponsor: Johnny C. Brown
Chief Operating Officer

Operating Unit: Department of Radiology, John H. Stroger, Jr. Hospital of Cook County

Description of Services: Request to extend and increase contract **05-41-59** with **LifeScan Chicago (Chicago, IL 60612)** for the provision of **Positron Emission Tomography (PET scanning)**.

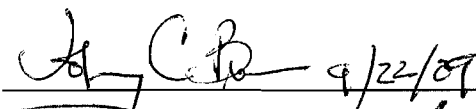
Justification for This contract: Due to the unforeseen technical issues with the new website, Purchasing is unable to schedule bid openings at this time therefore this contract needs an extension until these issues are resolved and this service can be put out for bid.

Cost of Contract And Terms: Original Contract Period: 12/1/06 – 11/30/08 (\$433,800.00)
1st extension & increase: 12/1/08 – 2/28/09 (\$78,000.00)
2nd extension & increase: 3/1/09 – 9/30/09 (\$215,000.00)
This request: 10/1/2009 – 3/31/2010 - \$180,000.00

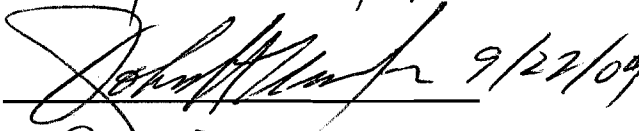
Budget Info: Fiscal Impact: **\$180,000.00**
Budget Acct. No. 897 - 278

Signatures:

Sponsor

 9/22/09

Operating Unit CFO

 9/22/09

CCHHS Director of Purchasing



Request #

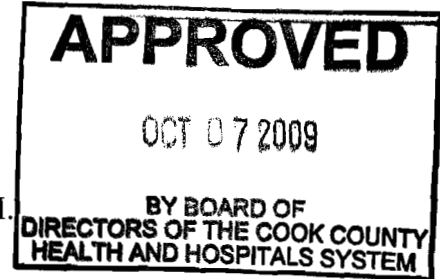
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COOK COUNTY HEALTH AND HOSPITALS SYSTEM

Advertise For Bids & Enter & Execute

Date: September 28, 2009

Sponsor: Stephen A. Martin, Fr., Ph.D., M.P.H.
Chief Operating Officer



Operating Unit: Department of Public Health, Cook County Health & Hospitals System

Description of Services: Requesting authorization to advertise for bids and to enter and execute the necessary contracts to obtain the following items listed in the Urban Area Security Initiative Public Health Committee purchasing plans for Stroger Hospital of Cook County, Provident Hospital of Cook County, and Oak Forest Hospital of Cook County:

1. Plan for Stroger Hospital of Cook County;
2. Plan for Provident Hospital of Cook County; and
3. Plan for Oak Forest Hospital of Cook County.

Cost of Contract And Terms: These items will be obtained utilizing grant funds from the United States Department of Homeland Security's Urban Area Security Initiative provided to the County of Cook.

Budget Info: No Fiscal Impact (grant funded)

Signatures:

Operating Unit CFO

A handwritten signature in dark ink, appearing to be "L. C. C.", written over a horizontal line.

CCHHS Director of Purchasing

A handwritten signature in dark ink, appearing to be "Resin Duff", written over a horizontal line.

CCHHS COO

A handwritten signature in dark ink, appearing to be "Anthony J. Karl", written over a horizontal line.

Request #
2

Stroger Hospital of Cook County

<i>General AEL Description (if available)</i>	<i>AEL Code</i>	<i>Justification</i>	<i>Item (Sample Vendor)</i>	<i>Estimated Quantity Requested*</i>
Canister, CBRN, APR	01AR-02-APRC	Replaces expiring canisters for current APR inventory for chemical protection	North Defender P100	6
Respirator, PAPR, CBRN	01AR-03-PAPA	Upgrade current PAPR inventory to FEMA-required NIOSH CBRN standard	3M BE-10 NIOSH CBRN-approved upgrade kit	12
			Shower/cleaning kit (case of 2)	6
Battery Pack, PAPR	01AR-03-PAPB	Replaces expiring lithium batteries with rechargeable NiMH batteries for existing PAPRs	3M NiMH battery	12
			Charger	12
Respirator, Escape APR, Single-use, CBRN	01AR-040APER	Allows immediate protection of resuscitation-area staff if chemical hazard becomes evident when patient is already within facility	North ER2000	24
Respirator, Particulate, Disposable	01AR-06-DISP	Provides dust protection to staff from patients with contamination following IED/RDD	3M 8577 P95 (10/box)	0
Tester, Mask Leak/Fit	01AR-07-FTST	Necessary for fit testing staff before CBRN APR use	ARAMSCO Model 2060 fit test tent	2
			Banana oil ampules (10)	8
Ensemble, Terrorism Incident Protective, NFPA Class 3	01CB-03-ENSM	Protects staff from liquid splash and dust from CBRNE victims during decon and medical care	Tychem F, L/XL (w/booties)	50
Suit, Training (Class 3)	01BC-03-TRST	Less-expensive simulated NFPA Class 3 suit for training exercises	PPE training kit	50

<i>General AEL Description (if available)</i>	<i>AEL Code</i>	<i>Justification</i>	<i>Item (Sample Vendor)</i>	<i>Estimated Quantity Requested*</i>
Device, Eye and Face Protection, EMS, single-use NFPA 1999	01EM-01-EFPS	Protects staff from liquid splash and dust from IED victims during medical care	Facemask with eye shield, case	0
Footwear, Liquid splash protective, NFPA 1992	01SP-02-FTWR	Blood splash protection when treating IED victims	Norcros chemical boots	30
Gloves, Liquid splash protective	01SP-02GLOV	Blood splash protection when treating IED victims	North Butyl rubber (pr.)	24
Garment, Liquid Splash-protective	01SP-02-GRMT	Blood splash protection when treating IED victims	Blue privacy gown, 25/cs	6
Protection, Eye	01ZA-03-EYEP	Protect rescuers' eyes in post-IED rescue and recovery during scene response	Uvex Safety Specs	24
Protection, Hearing	01ZA-04-HEAR	Protect rescuers' ears in post-IED rescue and recovery during scene response (heavy equipment)	Cap-mount earmuffs	6
Garment/Vest, Cooling	01ZA-06-COOL	Prevent heat injury in rescuers working outdoors in summer wearing PPE	ARAMSCO 40683	12
			Cooling inserts	12
Hardhat	01ZA-06-HHAT	Protect rescuers' heads in post-IED rescue and recovery during scene response	MSA V-Gard	6
Hydration system, Personal	01ZA-06-HYDR	Prevent dehydration & heat injury in responders during warm-weather operations outdoors; for wear under PPE	Camelbak Chem Bio Reservoir	12
Vest, High-visibility	01ZA-06-VEST	Safety vest for responders to IED scene, and during outdoor decon operations at night	ML Kishigo 3700 Series	12
Bag/Box, Ensemble Gear Storage	01ZP-00-GBAG	Storage of PPE ensembles prior to use; maintains effectiveness and maximizes shelf life	ARAMSCO duffel	6
Lighting, Portable area illumination	03OE-03-LTPA	Illuminate outdoor staging and triage areas during IED/mass casualty incident; also decon	Halide Twin Head telescoping worklight	2
			Power Cords	2

<i>General AEL Description (if available)</i>	<i>AEL Code</i>	<i>Justification</i>	<i>Item (Sample Vendor)</i>	<i>Estimated Quantity Requested*</i>
System, Public address, Handheld	03OE-03-MEGA	Communicate with victims and responders during mass-casualty care (triage, staging, decon), including responders in hood PPE whose voices are muffled	Bullhorn/siren	1
			CSVAi Voice Amplifier for PPE	12
Signs	03OE-03-SIGN	Deliniate response areas for trauma patients (green/yellow/red), decon zones	Ferno command post flags	14
Timer	03OE-03-TIMR	Monitor rescuer exposure time in PPE, and during RDD IED response	31" pace clock	2
Light, Hand-held or helmet mount	03OE-04-LTHH	Personal illumination source during nighttime response to MCI and CBRNE incident	Streamlight headlight convertible	30
Light, Hand-held or helmet mount			Garritty hand-crank rechargeable	30
Tape, Boundary-marking	02SR-03-TPBM	Deliniate response areas for trauma patients (green/yellow/red), decon zones	ARAMSCO; various	20
Display, Video	04MD-03-DISP	Data projector for emergency department command area	Dell 2400MP	1
Detector, IMS, Point, Chemical Agent	07CD-01-DPSI	Chemical warfare agent and toxic industrial chemical detector for assessment of CBRNE victims	Smiths HGVI chemical detector	1
Paper, Indicating, M-8	07CD-01-INPA	Chemical warfare agent detection and identification paper for liquid agents	C8	6
Tape Indicating, M-9	07CD-01-INTP	Chemical warfare agent detection and identification paper tape for vapor agents	C9	4

General AEL Description (if available)	AEL Code	Justification	Item (Sample Vendor)	Estimated Quantity Requested*
Dosimeter, Personal, Electronic	07RD-01-EPD	Monitors responder exposure to radiation during RDD/IED or nuclear explosive response	DMC-2000S	6
Dosimeter, Personal, Electronic	07RD-01-EPD	Monitors responder exposure to radiation during RDD/IED or nuclear explosive response	LDB 220 Dosimeter Reader	2
Meter, Survey, handheld	07RD-01-HHSM	Locates and measures ionizing radiation during RDD/IED or nuclear incident response	Fluke Victoreen alpha/beta/gamma	1
Identifier, Isotope, Radionuclide	07-RD-01-RIID	Detects and identifies radionuclide contamination after radiation presence is detected; distinguishes medical from weapon isotopes	Fisher Thermo Identifier	2
Equipment, Environmental Surveillance, Fixed	07SE-03-ENVS	Provide current environmental conditions during response; support CBRNE detectors	Midland S.A.M.E.	2
Kits, Personal Decontamination	08D1-01-KITD	Self-decontamination kits for ambulatory casualties, and for contaminated staff	Adult or Child Decon Kit	100
Device, Liquid Decon Containment	08D2-01-LDCD	Temporary dikes to keep contaminated shower runoff away from clean areas	Wheeled overpack SpillKit	2
Lighting, Decontamination Area	08D2-01-LITE	Illuminate outdoor staging and triage areas during IED/mass casualty incident; also decon	Halide Quad Head worklight w/power cord	1
Items, Support, Decontamination Corridor	08D2-01-TDCS	Delinate response areas for trauma patients (green/yellow/red), decon zones	ARAMSCO marking kit	2
Blankets, Disposable	08D3-01-BLKT	Prevent hypothermia in post-decon patients	North emergency blanket	100
Clothing, Disposable Modesty	08D3-01-CLOM	Disposable clothing after contaminated clothing removed and contained	Summus disposable scrubs, 50/cs	6
Bag/Kit/Pack, Medical	09ME-01-BAGM	Contain and transport response supplies	EMS Duffel	2

<i>General AEL Description (if available)</i>	<i>AEL Code</i>	<i>Justification</i>	<i>Item (Sample Vendor)</i>	<i>Estimated Quantity Requested*</i>
Cots	09ME-01-COTS	Portable, temporary beds for mass-casualty surge capacity	ConvertaCot	100
Cots	09ME-01-COTS		InstaKit Disposable bedding (10/cs)	24
MCI Kits	09ME-01-MCIK	Supplies necessary for MCI response, including triage tags, triage area tape, ICS position vests	HICS A Series Vests, ML Kishigo	0
Tensabarrier retractable barriers			Tensabarrier retractable barriers	6
Tool, Pediatric Patient Assessment	09ME-01-PEDT	Permit rapid dose calculation for pediatric CBRNE patients	Braslow Tape	6
Equipment, Airway Management	09ME-02-AWMG	Essential for management of the medically unstable CBRNE victim	Laryngoscope, Rusch, with disposable blade set	10
Equipment, Suction Units	09ME-02-SUCT	Remove secretions from airway of CBRNE victims	Res-Q-Vac	10
Ventilators	09ME-02-VENT	Matches SNS ventilator; SNS surge supplies not available soon enough for large bombing or chemical incident	UniVent Impact Eagle 754	4
Stethoscope	09ME-03-STET	For scene response kits, and use with CBRNE contamination where stethoscope may need to be discarded	Graham Field stethoscope	30
Shears, Medical	09MS-01-SHER	Remove clothing of clean or contaminated CBRNE victims	EMS Scissors	20
Tags and supplies, Triage	09MS-01-TTAG	Essential for CBRNE MCI triage	CBRN Triage Tags, 50	6
Ventilator, Disposable	09MS-02-VENT	Support contaminated victim's ventilation	Surevent disposable ventilator	30
Equipment, Training/Casualty Simulation	09TR-01-CSIM	Train responders in CBRNE response; permits realistic MCI exercises without need for live volunteers	Laerdal trauma simulation mannequins	2

General AEL Description (if available)	AEL Code	Justification	Item (Sample Vendor)	Estimated Quantity Requested*
Equipment, Training/Casualty Simulation	09TR-01-CSIM	Train responders in CBRNE response; permits realistic MCI exercises without need for live volunteers	Simulator lab electronics and wiring	1
Equipment, Training/Casualty Simulation	09TR-01-CSIM	Portable programmable simulator, permit real-time training at all CCHN facilities	Laerdal SimMan3G	1
Supplies, Moulage	09TR-01-MKIT	Train responders in CBRNE response; permits realistic MCI exercises	Simulaids moulage kit	2
Simulator, Auto Injector, Training	09TR-01-SAIT	Train responders in CANA and NAAK use (ChemPack stockpile located at SHCC)	NAAK simulator, 25/case	2
Simulator, Auto Injector, Training	09TR-01-SAIT		CANA simulator, 25/case	2
Batteries	10BC-00-BATT	Necessary for portable equipment	All types, disposable	1
Equipment, Bulk Material Handling	19MH-00-BULK	Deploy existing CBRNE MCI materials from secure storage to field of operations	Pallet Master	2
Cart, Field	19MH-00-CART	Transport equipment, such as PPE, from storage to operations area	Platform cart	4
Containers, Storage	19MH-00-CONT	Secure storage of CBRNE response materials	Hospital PPE cabinet	4
Containers, Storage	19MH-00-CONT		Storage enclosure	1
Installation	21GN-00-INST	Install FEMA grant equipment	Installation	1
System, Water Purification	19GN-00-H2OP	Purify water for staff and patient use in the event of municipal water pressure loss	FirstWater Outpost 12	1
		Replacement filters for water purification	Filters	2
		Distribution and storage materials for purified water	FirstWater Supply Station 3000	2
			FirstWater Filling Station	1

General AEL Description (if available)	AEL Code	Justification	Item (Sample Vendor)	Estimated Quantity Requested*
Shipping	21GN-00-SHIP	Shipping costs for FEMA grant equipment - will depend on equipment allowed	Shipping Estimate Cost (5%)	1
Training, Equipment-Specific	21GN-00-TRNG	Training on CBRNE equipment purchased under grant for emergency response personnel (adult emergency, pediatric emergency, trauma)	Detection equipment training, CBRNE - 200 staff members, 8 instructors	1
Regional Preparedness Planning		Enhance mass care for mass trauma response, CI/KR protection for governmental healthcare facilities	Response exercises and planning, including Hospital Police	1
Regional Preparedness Planning			Administrative planning support, hourly	120
Regional Preparedness Planning			CCHHS hospitals & ACHN integrated emergency response - HVA, planning, exercise development	1
Bandages and Products, Hemostatic	09MS-04-HSBN	Life-saving, prevents exsanguination after IED trauma	Hemcon 4x4,5/box	6
			Roll	20

Note: *Quantity may change due to pricing and current emergency needs.

Provident Hospital

<i>General AEL Description (if available)</i>	<i>AEL Code</i>	<i>Justification</i>	<i>Item (Sample Vendor)</i>	<i>Estimated Quantity Requested*</i>
System, Water Purification	19GN-00-H2OP	Purify water for staff and patient use in the event of municipal water pressure loss	FirstWater Outpost 12	1
		Replacement filters for water purification		1
		Distribution and storage materials for purified water	FirstWater Supply Station 3000	1
			FirstWater Filling Station	1
		Vessel to store the purified water for individuals.. Each AquaBag stores up to 3 gallons (11.4 liters) of purified water	Aqua Bags	1,000

Note: *Quantity may change due to pricing and current emergency needs.

Oak Forest Hospital

<i>General AEL Description (if available)</i>	<i>AEL Code</i>	<i>Justification</i>	<i>Item (Sample Vendor)</i>	<i>Estimated Quantity Requested*</i>
Light, Hand-held or helmet mount			Garrity hand-crank rechargeable	4
Dosimeter, Personal, Electronic	07RD-01-EPD	Monitors responder exposure to radiation during RDD/IED or nuclear explosive response	DMC-2000S	4
Dosimeter, Personal, Electronic	07RD-01-EPD	Monitors responder exposure to radiation during RDD/IED or nuclear explosive response	LDB 220 Dosimeter Reader	1
Kits, Personal Decontamination	08D1-01-KITD	Self-decontamination kits for ambulatory casualties, and for contaminated staff	Adult or Child Decon Kit	125
Lighting, Decontamination Area	08D2-01-LITE	Illuminate outdoor staging and triage areas during IED/mass casualty incident; also decon	Halide Quad Head worklight w/power cord	1
Blankets, Disposable	08D3-01-BLKT	Prevent hypothermia in post-decon patients	North emergency blanket	100
Clothing, Disposable Modesty	08D3-01-CLOM	Disposable clothing after contaminated clothing removed and contained	Summus disposable scrubs, 50/cs	6
Cots	09ME-01-COTS	Portable, temporary beds for mass-casualty surge capacity	ConvertaCot	50
			InstaKit Disposable bedding (10/cs)	22
MCI Kits	09ME-01-MCIK	Supplies necessary for MCI response, including triage tags, triage area tape, ICS position vests	HICS A Series Vests, ML Kishigo	1
			Tensabarrier retractable barriers	6
Tool, Pediatric Patient Assessment	09ME-01-PEDT	Permit rapid dose calculation for pediatric CBRNE patients	Braslow Tape	6

<i>General AEL Description (if available)</i>	<i>AEL Code</i>	<i>Justification</i>	<i>Item (Sample Vendor)</i>	<i>Estimated Quantity Requested*</i>
Equipment, Airway Management	09ME-02-AWMG	Essential for management of the medically unstable CBRNE victim	Laryngoscope, Rusch, with disposable blade set	10
Equipment, Suction Units	09ME-02-SUCT	Remove secretions from airway of CBRNE victims	Res-Q-Vac	10
Stethoscope	09ME-03-STET	For scene response kits, and use with CBRNE contamination where stethoscope may need to be discarded	Graham Field stethoscope	30
Shears, Medical	09MS-01-SHER	Remove clothing of clean or contaminated CBRNE victims	EMS Scissors	20
Tags and supplies, Triage	09MS-01-TTAG	Essential for CBRNE MCI triage	CBRN Triage Tags, 50	6
Batteries	10BC-00-BATT	Necessary for portable equipment	All types, disposable	1
Respirator, PAPR, CBRN	01AR-03-PAPA	Upgrade current PAPR inventory to FEMA-required NIOSH CBRN standard	3M BE-TO NIOSH CBRN-approved upgrade kit	12
Battery Pack, PAPR	01AR-03-PAPB	Replaces expiring lithium batteries with rechargeable NiMH batteries for existing PAPRs	3M NiMH battery	12
			Charger	12
Respirator, Particulate, Disposable	01AR-06-DISP	Provides dust protection to staff from patients with contamination following IED/RDD	3M 8577 P95 (10/box)	75
Device, Eye and Face Protection, EMS, single-use NFPA 1999	01EM-01-EFPS	Protects staff from liquid splash and dust from IED victims during medical care	Facemask with eye shield, case	2
Garment, Liquid Splash-protective	01SP-02-GRMT	Blood splash protection when treating IED victims	Blue privacy gown, 25/cs	6
Protection, Eye	01ZA-03-EYEP	Protect rescuers' eyes in post-IED rescue and recovery during scene response	Uvex Safety Specs	24
			Cooling inserts	12

<i>General AEL Description (if available)</i>	<i>AEL Code</i>	<i>Justification</i>	<i>Item (Sample Vendor)</i>	<i>Estimated Quantity Requested*</i>
Vest, High-visibility	01ZA-06-VEST	Safety vest for responders to IED scene, and during outdoor decon operations at night	ML Kishigo 3700 Series	12
Bag/Box, Ensemble Gear Storage	01ZP-00-GBAG	Storage of PPE ensembles prior to use; maintains effectiveness and maximizes shelf life	ARAMSCO duffel	6
Lighting, Portable area illumination	03OE-03-LTPA	Illuminate outdoor staging and triage areas during IED/mass casualty incident; also decon	Halide Twin Head telescoping worklight	2
			Power Cords	2
System, Public address, Handheld	03OE-03-MEGA	Communicate with victims and responders during mass-casualty care (triage, staging, decon), including responders in hood PPE whose voices are muffled	Bullhorn/siren	2
Signs	03OE-03-SIGN	Deliniate response areas for trauma patients (green/yellow/red), decon zones	Ferno command post flags	14
Light, Hand-held or helmet mount	03OE-04-LTHH	Personal illumination source during nighttime response to MCI and CBRNE incident	Streamlight headlight convertible	30
Light, Hand-held or helmet mount			Garrrity hand-crank rechargeable	22
Tape, Boundary-marking	02SR-03-TPBM	Deliniate response areas for trauma patients (green/yellow/red), decon zones	ARAMSCO; various	20
Display, Video	04MD-03-DISP	Data projector for emergency department command area	Dell 2400MP	1
Dosimeter, Personal, Electronic	07RD-01-EPD	Monitors responder exposure to radiation during RDD/IED or nuclear explosive response	DMC-2000S	2

Note: *Quantity may change due to pricing and current emergency needs.